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     CIN, CONFSCI, CROPB, CROPU, DDFB, DGENE, DISSABS, DRUGB, DRUGMONOG2,
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          18243 S THROMBOXANE AND ASPIRIN
L1
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L2
              1 S 50-78-2
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     CIN, CONFSCI, CROPB, CROPU, DDFB, DGENE, DISSABS, DRUGB, DRUGMONOG2,
     DRUGU, EMBAL, EMBASE, ESBIOBASE, FEDRIP, ...' ENTERED AT 13:03:38 ON 03
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L3
           9682 S L2 AND THROMBOXANE
L4
             18 S L3 AND (QUARTILE OR QUANTILE)
L5
             11 DUP REM L4 (7 DUPLICATES REMOVED)
L6
             37 S L1 AND (QUARTILE OR QUANTILE)
L7
             21 DUP REM L6 (16 DUPLICATES REMOVED)
L8
             13 S L7 NOT L5
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=> s thromboxane AND aspirin
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         18243 THROMBOXANE AND ASPIRIN
=> file reg
COST IN U.S. DOLLARS
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FILE 'REGISTRY' ENTERED AT 13:03:05 ON 03 FEB 2006
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COPYRIGHT (C) 2006 American Chemical Society (ACS)
=> s 50-78-2
             1 50-78-2
                 (50-78-2/RN)
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=> d 12L2ANSWER 1 OF 1 REGISTRY COPYRIGHT 2006 ACS on STN RN **50-78-2** REGISTRY ED Entered STN: 16 Nov 1984 · CN Benzoic acid, 2-(acetyloxy)- (9CI) (CA INDEX NAME) OTHER NAMES: CN 2-(Acetyloxy)benzoic acid CN 2-Acetoxybenzoic acid CN 2-Carboxyphenyl acetate CN A.S.A. Empirin CN AC 5230

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     Aspro
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     Benaspir
ADDITIONAL NAMES NOT AVAILABLE IN THIS FORMAT - Use FCN, FIDE, or ALL for
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       BIOTECHNO, CA, CABA, CAOLD, CAPLUS, CASREACT, CBNB, CHEMCATS,
       CHEMINFORMRX, CHEMLIST, CIN, CSCHEM, CSNB, DDFU, DETHERM*, DIOGENES,
       DIPPR*, DRUGU, EMBASE, GMELIN*, HSDB*, IFICDB, IFIPAT, IFIUDB, IMSCOSEARCH, IPA, MEDLINE, MRCK*, MSDS-OHS, NAPRALERT, NIOSHTIC, PATDPASPC, PDLCOM*, PHAR, PIRA, PROMT, PROUSDDR, PS, RTECS*, SPECINFO,
       SYNTHLINE, TOXCENTER, TULSA, ULIDAT, USAN, USPAT2, USPATFULL, VETU, VTB
          (*File contains numerically searchable property data)
     Other Sources: DSL**, EINECS**, TSCA**
          (**Enter CHEMLIST File for up-to-date regulatory information)
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PROPERTY DATA AVAILABLE IN THE 'PROP' FORMAT

19615 REFERENCES IN FILE CA (1907 TO DATE)

383 REFERENCES TO NON-SPECIFIC DERIVATIVES IN FILE CA

19667 REFERENCES IN FILE CAPLUS (1907 TO DATE) 1 REFERENCES IN FILE CAOLD (PRIOR TO 1967)

=> file bioscience

=> s 12 and thromboxane

28 FILES SEARCHED...

56 FILES SEARCHED...

66 FILES SEARCHED...

L3 9682 L2 AND THROMBOXANE

=> s 13 AND (quartile OR quantile)

61 FILES SEARCHED...

L4 18 L3 AND (QUARTILE OR QUANTILE)

=> dup rem 14

DUPLICATE IS NOT AVAILABLE IN 'ADISINSIGHT, ADISNEWS, DGENE, DRUGMONOG2, FEDRIP, FOREGE, GENBANK, IMSPRODUCT, IMSRESEARCH, KOSMET, NUTRACEUT, PCTGEN, PHAR, PHARMAML, PROUSDDR, PS, RDISCLOSURE, SYNTHLINE'.
ANSWERS FROM THESE FILES WILL BE CONSIDERED UNIQUE
PROCESSING COMPLETED FOR L4

L5 11 DUP REM L4 (7 DUPLICATES REMOVED)

=> d 15 1-11 ibib abs

L5 ANSWER 1 OF 11 USPATFULL on STN

ACCESSION NUMBER: 2005:170928 USPATFULL

TITLE: Composition for the treatment and prevention of

endothelial dysfunction

INVENTOR(S): Petrus, Edward J., Austin, TX, UNITED STATES

RELATED APPLN. INFO.: Continuation of Ser. No. US 2003-436528, filed on 14

May 2003, PENDING Continuation-in-part of Ser. No. US 2001-947674, filed on 7 Sep 2001, GRANTED, Pat. No. US

6596708

DOCUMENT TYPE: Utility
FILE SEGMENT: APPLICATION

LEGAL REPRESENTATIVE: EDWARD J. RETRUS, 3413 SPANISH OAK DR., AUSTIN, TX,

78731, US

NUMBER OF CLAIMS: 20 EXEMPLARY CLAIM: 1 LINE COUNT: 746

CAS INDEXING IS AVAILABLE FOR THIS PATENT.

AB A composition for the treatment and prevention of endothelial dysfunction comprising a therapeutically effective amount of anti-inflammatory agents comprising; NSAIDs, an amino sugar and a zinc compound combined with dietary supplements and a method for the treatment and prevention of endothelial dysfunction in mammals.

CAS INDEXING IS AVAILABLE FOR THIS PATENT.

ANSWER 2 OF 11 EMBASE COPYRIGHT (c) 2006 Elsevier B.V. All rights

reserved on STN ACCESSION NUMBER:

2005579641 EMBASE

TITLE:

Persistent production of platelet thromboxane A2 in patients chronically treated with aspirin.

AUTHOR:

Pulcinelli F.M.; Riondino S.; Celestini A.; Pignatelli P.;

Trifiro E.; Di Renzo L.; Violi F.

CORPORATE SOURCE:

F.M. Pulcinelli, Dipartimento di Medicina Sperimentale e Patologia, Universita degli Studi La Sapienza, Viale Regina Elena 324, 00161 Roma, Italy. fabio.pulcinelli@uniromal.it Journal of Thrombosis and Haemostasis, (2005) Vol. 3, No.

SOURCE:

12, pp. 2784-2789. .

Refs: 13

ISSN: 1538-7933 CODEN: JTHOA5

COUNTRY:

United Kingdom DOCUMENT TYPE: Journal; Article

FILE SEGMENT:

Cardiovascular Diseases and Cardiovascular Surgery

025 Hematology 030 Pharmacology

Drug Literature Index 037

LANGUAGE:

English English

018

SUMMARY LANGUAGE:

ENTRY DATE:

Entered STN: 20060112 Last Updated on STN: 20060112

Background: Patients treated with aspirin may have a reduced sensitivity to its antiplatelet effect. The mechanism accounting for such a reduced sensitivity might involve an imparred interaction of aspirin with cyclooxygenase-1 (COX)-1. Objective: We sought to investigate whether platelets from patients under chronic treatment with aspirin still produce TxA2 and whether there is any relationship between the eventual persistent TxA2 formation and platelet aggregation. Finally, whether platelet-derived TxA2 can be inhibited by in vitro addition of aspirin. Methods: Collagen-induced platelet aggregation and thromboxane -A2 (TxA2) were measured in 196 patients theated with aspirin (100-330 mg day(-1)) because of previous vascular events or presence of risk factors
of atherosclerosis. Results: Collagen-induced TxA2 production of the entire cohort was 128.7 ± 21.6 pg 10(-8) cells and was significantly correlated with platelet aggregation (Spearman's correlation coefficient = 0.44; P < 0.0001). Patients in the highest quartile of TxA2 showed higher platelet response to collagen (P < δ ,0001) when compared with those in the lowest quartile. In a subgroup δf 96 patients, platelets were treated in vitro with a TxA2 receptor antagonist (13-azaprostanoic acid) or aspirin before stimulation with collagen. 13-APA acid significantly inhibited platelet aggregation. Aspirin reduced (-72.9%) TxA2 production in patients with TxA2 values above the median but it was ineffective in those with TxA2 values below the median. Conclusion: In some patients chronically treated with aspirin platelet production of TxA2 may persist and account for enhanced platelet aggregation. Incomplete inhibition of COX-1 seems to be implicated in persistent TxA2 production. .COPYRGT. 2005 International Society on Thrombosis and Haemostasis.

ANSWER 3 OF 11 USPATFULL on STN

ACCESSION NUMBER:

2004:151514 USPATFULL

TITLE: INVENTOR(S): Method for predicting cardiovascular events

Yusuf, Salim, Carlisle, CANADA Hirsh, Jack, Burlington, CANADA

Eikelboom, John, Canning Vale Wa, AUSTRALIA

NUMBER KIND DATE ______________

PATENT INFORMATION:

US 2004115735

A1 20040617

APPLICATION INFO.: US 2003-670122 A1 20030924 (10)

RELATED APPLN. INFO.: Continuation of Ser. No. WO 2003-CA422, filed on 24 Mar

2003, UNKNOWN

NUMBER DATE -----

PRIORITY INFORMATION: US 2002-367883P 20020324 (60)

DOCUMENT TYPE: Utility FILE SEGMENT: APPLICATION

LEGAL REPRESENTATIVE: FISH & RICHARDSON PC, 225 FRANKLIN ST, BOSTON, MA,

02110

NUMBER OF CLAIMS: 17 EXEMPLARY CLAIM:

NUMBER OF DRAWINGS: 4 Drawing Page(s)

LINE COUNT:

CAS INDEXING IS AVAILABLE FOR THIS PATENT.

A novel method for assessing the risk of a cardiovascular event is provided. The concentration of 11-dehydro thromboxane in a urine sample is measured and compared to a set of standardized quartile concentrations. A concentration of urinary 11-dehydro thromboxane that falls within the fourth quartile is

indicative of a greatly increased risk of a recurrent cardiovascular

event.

CAS INDEXING IS AVAILABLE FOR THIS PATENT.

ANSWER 4 OF 11 BIOSIS COPYRIGHT (c) 2006 The Thomson Corporation on STN

ACCESSION NUMBER: 2005:525101 BIOSIS DOCUMENT NUMBER: PREV200510315064

TITLE: Systemic inflammation and glycemic control as the

amplifying factors for aspirin-resistant

thromboxane biosynthesis in patients with coronary

artery disease.

AUTHOR(S): Ohmori, Hisako [Reprint Author]; Murasaki, Kagari M.;

Honda, Atsushi; Kakizawa, Yoshiko; Terajima, Yutaka;

Tanoue, Kenjino; Kasanuki, Hiroshi Takyo Womens Med Univ, Tokyo, Japan

CORPORATE SOURCE: SOURCE:

Circulation, (OCT 26 2004) Vol. 110, No. 17, Suppl. S, pp.

310-311.

Meeting Info.: 77th Scientific Meeting of the

American Heart-Association. New Orleans, LA, USA. November

07 -10, 2004. Amer Heart Assoc. CODEN: CIRCAZ. ISSN: 0009-7322.

DOCUMENT TYPE: Conference; (Meeting)

Conference; Abstract; (Meeting Abstract)

English LANGUAGE:

Entered STN: 1 Dec 2005 ENTRY DATE:

Last Updated on STN: \ Dec 2005

Background Aspirin reduces the risk of cardiovascular events in a broad category of high-risk patients. The primary antithrombotic mechanism is inhibition of biosynthesis of thromboxane A(2) by irreversibly acetylating platelet cyclooxygenase-1. However, aspirin's antiplatelet effect may not be uniform in all patients. Qinical predictors and causative factors of aspirin resistance have not been fully understood. To clarify the clinical features of aspirin resistant thromboxane synthesis, we evaluated systemic inflammation and Alycemic control in patients with coronary artery disease Methods and Results 36 consecutive patients with stable coronary artery disease who had taken 100mg of aspirin for previous seven days were enrolled into this study (mean age 67.7 + -9.1 years, 10 female). Urinary 11-dehydro-thromboxane B-2 (11-d-TXB2), a stable metabolite of thromboxane A2, high-sensitivity CRP (hs-CRP), and glycated hemoglobin (HbA1&) were measured in all patients and healthy controls. We also evaluated cyclooxygenase-2 (COX-2) expression of circulating monocytes. Orinary concentrations of 11-d-TXB2 (ng/m mol Creatinine), hs-CRP (ng/mL)\and

HbAlc (%) were significantly higher in patients with coronary artery disease compared with healthy control controls. Among patients, compared with upper quartile of 11-dehydro-TXB2 (group A) and other (group B); group A showed significantly higher levels of hs-CRP and HbAlc. (11\d-TXB2 group A 30.6 +/- 8.601 versus group B 12.5 +/- 2.8,P<0.01, hs-QRP 2411 +/- 713 versus 1010 +/- 284, P < 0.01, HbAlc 7.2 +/- 1.1 versus 5.9 \bigvee - 0.9%, P<0.01). Peripheral monocyte expression of COX-2 was detected in 8 of the 9 patients from group A, while 4 of the 27 patients from group B. Statistically significant correlations between 11-d-TXB2 and both HbA1c (r=0.63, P<0.01) and hs-CRP (r=0.66, P<0.01) were observed. Conclusions These results indicate that systemic inflammation and glycemic control is the amplifying factors for aspirin resistant thromboxand biosynthesis in patients with coronary artery disease. These results may help for tailoring therapy to control thromboxane A(2) synthesis to improve disease development and prognosis.

ANSWER 5 OF 11 RIOSIS COPYRIGHT (c) 2006 The Thomson Corporation on STN ACCESSION NUMBER: 20****5:524656 BIOSIS

DOCUMENT NUMBER:

PRE 200510314619

TITLE:

In vitro tests of aspirin resistance are poorly correlated and identify distinct subgroups with aspirin resistance.

AUTHOR(S):

Faraday Nauder [Reprint Author]; Becker, Lewis C.; Yanek, Lisa R.; Moy, Taryn F.; Chiles, Kelly; Kerns, Michelle;

Hasan, Ahmed A.; Becker, Diane M.

CORPORATE SOURCE:

Johns Hopkins Med Inst, Baltimore, MD 21205 USA

SOURCE:

Circulation, (OCT 26 2004) Vol. 110, No. 17, Suppl. S, pp.

217.

Meeting Info.: 77th Scientific Meeting of the American-Heart-Association. New Orleans, LA, USA. November

07 -10, 2004. Amer Heart Assoc. CODEN: CIRCAZ. ISSN: 0009-7322.

DOCUMENT TYPE:

Conference; (Meeting)

Conference; Abstract (Meeting Abstract)

LANGUAGE:

English

ENTRY DATE:

Entered STN: 1 Dec 200%

Last Updated on STN: 1 Dec 2005

Platelet aggregation, PFA-100, and urinary 11-dehydro thromboxane B2 (U-TxB(2)) are in vitro tests reported to identify aspirin (ASA) resistance in patients with clinical cardiovascular disease. The prevalence of reported ASA resistance ranges from 6-60%. We determined the prevalence of ASA resistance and relationships among tests of ASA resistance in apparently healthy high-risk individuals. Methods: We recruited asymptomatic siblings of patients $w_{\mathbf{i}}$ th documented CAD before age 60, along with the sibling's adult offspring \mathbf{A} d the offspring's co-parent. After receiving 81 mg ASAI day for \4 days, platelet function was assessed by optical aggregometry to adenosine diphosphate (ADP) and arachidonic acid (AA), PFA-100 (collagen-epineph ine cartridge), and u-TxB2. Criteria for ASA resistance were defined according to previously published criteria: ADP aggregation >70%, AA aggregation >20%, PFA-100 < 194 sec. and u-TxB(2) in highest quartile. Results \ Subjects (N=169; mean age 48 +/- 13, 47% male, 21% African American) underwent all 4 tests in a research laboratory. Values for each of \backslash the 4 platelet measures after ASA were: ADP aggregation=67 +/- 12%, AA aggregation=0.4 +/- 1.2%, PFA-100=269 +/- 58 sec, and u-TxB(2) = 535 +/ 616 pg/ml. The prevalence of ASA resistance, as defined by ADP aggregation, AA aggregation, PFA-100, and u-TxB(2) was 52%, 0%, 17%, and χ 7%, respectively, The correlations among the 4 different measures of platelet function were all low (Spearman rho ranged from -0.14 to +0.06 for pairwise comparisons, all statistically nonsignificant). Overall agreement among the 4 tests for classifying ASA resistant subjects was low (kappa = 0.0310, 95% Cl -0.1084 to + 0.1704, NS). Conclusion: nasymptomatic subjects at high risk for CAD, the observed prevalence of ASA resistance is dependent on the in vitro test used to define the phenomenon. Different tests identify distinct subgroups with ASA

resistance. The poor correlation and low overall classification agreement suggests that each test measures a distinct in vitro phenotype in response to ASA.

1

J5 \ ANSWER 6 OF 11 USPATFULL on STN DUPLICATE 1

ACCESSION NUMBER: 2003:305998 USPATFULL

TITLE Composition for the treatment and prevention of

endothelial dysfunction

INVENTOR(S): Petrus, Edward J., Austin, TX, UNITED STATES

NUMBER KIND DATE

PATENT INFORMATION: US 2003215430 A1 20031120
US 6930099 B2 20050816

APPLICATION INFO: US 2003-436528 A1 20030514

APPLICATION INFO.: US 2003-436528 A1 20030514 (10)

RELATED APPLN. INFO.: Continuation-in-part of Ser. No. US 2001-947674, filed

on 7 Sep 2001, GRANTED, Pat. No. US 6596708

DOCUMENT TYPE: Utility
FILE SEGMENT: APPLICATION

LEGAL REPRESENTATIVE: Edward J. Petrus, 3413 Spanish Oak Dr., Austin, TX,

78731

NUMBER OF CLAIMS: 20 EXEMPLARY CLAIM: 1 LINE COUNT: 732

CAS INDEXING IS AVAILABLE FOR THIS PATENT

AB This invention relates to a method and compositions for the treatment and prevention of disorders associated with endothelial dysfunction consisting of anti-inflammatory agents and dietary supplements.

CAS INDEXING IS AVAILABLE FOR THIS PATENT.

L5 ANSWER 7 OF 11 CAPLUS COPYRIGHT 2006 ACS on STN

ACCESSION NUMBER: 2003:778066 CAPLUS

DOCUMENT NUMBER: 139:273208

TITLE: Method and device for predicting cardiovascular events

INVENTOR(S): Yusuf, Salim; Hirsh, Jack; Eikelboom, John

PATENT ASSIGNEE(S): McMaster University, Can. SOURCE: PCT Int. Appl., 36 pp.

CODEN: PIXXD2

DOCUMENT TYPE: Patent LANGUAGE: English

FAMILY ACC. NUM. COUNT: 2

PATENT INFORMATION:

PATENT NO.				KIND		DATE		APPLICATION NO.			DATE							
WO	2003081236 2003081236 2003081236			A3 2004042		0429	WO 2003-CA422				20030324							
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US	2004	1268	26		A1		2004	0701	i	US 20	003-	6701	18	APP	` 2	0030	924	

US 2002-367883P P 20020324 W 20030324 WO 2003-CA422

A novel method for assessing the risk of cardiovascular event is provided. The concentration of 11-dehydro thromboxane in a urine sample is measured and compared to a set of standardized quartile concns. A concentration of urinary 11-dehydro thromboxane that falls within the fourth quartile is indicative of a greatly increased risk of a recurrent cardiovascular event.

ANSWER 8 OF 11 USPATFULL on STN

2003:197137 USPATFULL ACCESSION NUMBER:

Composition for the treatment and prevention of TITLE:

endothelial dysfunction

INVENTOR(S)? Petrus, Edward J., Austin, TX, United States

Advanced Medical Instruments, Austin, TX, United States PATENT ASSIGNEE(S):

(U.S. corporation)

NUMBER

KIND DATE US 6596708 B1 20030722 20010907 (9) PATENT INFORMATION: APPLICATION INFO.:

DOCUMENT TYPE: Mtility FILE SEGMENT: GRANTED

Wilson, James O. PRIMARY EXAMINER: ASSISTANT EXAMINER: Fisher La Tonia

NUMBER OF CLAIMS: 20 EXEMPLARY CLAIM:

NUMBER OF DRAWINGS: 0 Drawing Rigure(s); 0 Drawing Page(s)

LINE COUNT: 676

CAS INDEXING IS AVAILABLE FOR THIS PATENT.

A composition for the treatment and prevention of endothelial dysfunction comprising a therapeut cally effective amount of

anti-inflammatory agents comprising; acetylsalicylic acid, an amino

sugar and a zinc compound.

CAS INDEXING IS AVAILABLE FOR THIS PATENT.

ANSWER 9 OF 11 BIOSIS COPYRIGHT (c) 2006 The Thomson Corporation on STN

DUPLICATE 2

ACCESSION NUMBER: 2002:262446 BIOSIS DOCUMENT NUMBER: PREV200200262446

TITLE: Aspirin-resistant thromboxane biosynthesis and

the risk of myocardial infarction, stroke, or cardiovascular death in patients at high risk for

cardiovascular events.

Eikelboom, John W. [Reprint author]; Hirsh, Jack; Weitz, AUTHOR(S):

Jeffrey I.; Johnston, Marilyn; Yi, Qilong; Yusuf, Salim Thrombosis and Haemophilia Unit, Royal Perth Hospital,

CORPORATE SOURCE: Wellington Street, Perth, WA, 6897, Australia

john.eikelboom@health.wa.gov.au

SOURCE: Circulation, (April 9, 2002) Vol. 105, No. 14, pp.

1650-1655. print:

CODEN: CIRCAZ. ISSN: 0009-7322.

DOCUMENT TYPE: Article LANGUAGE: English

ENTRY DATE: Entered STN: 1 May 2002

Last Updated on STN: 1 May 2002

Background: We studied whether aspirin resistance, defined as failure of suppression of thromboxane generation, increases the risk of cardiovascular events in a high-risk population. Methods and Results: Baseline urine samples were obtained from 5529 Canadian patients enrolled in the Heart Outcomes Prevention Evaluation (HOPE) Study. Using a nested case-control design, we measured urinary 11-dehydro thromboxane B2 levels, a marker of in vivo thromboxane generation, in 488 cases treated with aspirin who had myocardial infarction, stroke, or

cardiovascular death during 5 years of follow-up and in 488 sex- and age-matched control subjects also receiving aspirin who did not have an event. After adjustment for baseline differences, the odds for the composite outcome of myocardial infarction, stroke, or cardiovascular death increased with each increasing quartile of 11-dehydro thromboxane B2, with patients in the upper quartile having a 1.8-times-higher risk than those in the lower quartile (OR, 1.8; 95% CI, 1.2 to 2.7; P=0.009). Those in the upper quartile had a 2-times-higher risk of myocardial infarction (OR, 2.0; 95% CI, 1.2 to 3.4; P=0.006) and a 3.5-times-higher risk of cardiovascular death (OR, 3.5; 95% CI, 1.7 to 7.4; P<0.001) than those in the lower quartile. Conclusions: In aspirin-treated patients, urinary concentrations of 11-dehydro thromboxane B2 predict the future risk of myocardial infarction or cardiovascular death. These findings raise the possibility that elevated urinary 11-dehydro thromboxane B2 levels identify patients who are relatively resistant to aspirin and who may benefit from additional antiplatelet therapies or treatments that more effectively block in vivo thromboxane production or activity.

L5 ANSWER 10 OF 11 BIOTECHNO COPYRIGHT 2006 Elsevier Science B.V. on STN DUPLICATE

ACCESSION NUMBER:

2002:35203365 BIOTECHNO

TITLE:

Aspirin-resistant thromboxane biosynthesis and the risk of myocardial infarction, stroke, or cardiovascular death in patients at high risk for

cardiovascular death in patients at high risk for cardiovascular events. Eikelboom JW, Hirsh J, Weitz J, Johnston M, Yi Q, Yusuf S. Circulation 2002; 105:

1650-1655.

AUTHOR:

Anand S.S.

CORPORATE SOURCE: Anand S.S. Anan

S.S. Anand, Hamilton General Hospital, 237 Barton St.

East, Hamilton, Ont. L8L 2X2, Canada.

E-mail: anands@mcmaster.ca

SOURCE:

Vascular Medicine, (2002), 7/2 (157-158), 2

reference(s)

CODEN: VAMLFP ISSN: 1358-863X

DOCUMENT TYPE: Journal; Article COUNTRY: United Kingdom

LANGUAGE: English
SUMMARY LANGUAGE: English
AN 2002:35203365 BIOTECHNO

AB Question: Among high-risk patients with vascular disease treated with aspirin, is incomplete suppression of thromboxane generation associated with an increased risk of recurrent cardiovascular events? Population: Men and women >=55 years of age who had a history of coronary artery disease, stroke, peripheral vascular disease, or diabetes plus at least one other CV risk factor who participated in the HOPE trial which was a 2 \times 2 factorial randomized controlled trial of ramipril and vitamin E. Design and methods: Nested case-control study of the 5529 patients from the HOPE trial participants from Canada in whom a urine sample was collected at baseline. All samples were sent to a central laboratory and stored at -80°C. Only those patients who were taking aspirin were included. Cases were defined as individuals who had a confirmed MI, stroke, or CV death after randomization. Control subjects were randomly selected from aspirin-treated patients who provided adequate urine samples but did not suffer MI, stroke or CV death after randomization. Cases and controls were matched according to sex and age (±5 years) in a ratio of 1:1. Urine was thawed and assayed for 11-dehydro thromboxane B.sub.2 levels using the Caymann Chemical immunoassay. Results: Among 488 cases and 488 matched controls, the odds of an MI, stroke or CV death increased with each increasing quartile of 11-dehydro thromboxane B.sub.2, with patients in the upper quartile having a 1.8 times higher risk than those in the lower quartile (OR = 1.8; 95% CI: 1.2-2.7, p = 0.009). Conclusion: Among aspirin-treated patents who have established

vascular disease, urinary 11-dehydro thromboxane B.sub.2 predicts the future risk of MI and CV death, and may reflect 'aspirin resistance'.

ANSWER 1 OF 11 ADISNEWS COPYRIGHT (C) 2006 Adis Data Information BV on L5

ACCESSION NUMBER:

2002:2961 ED: 20 Jun 2002 UP: 20 Jun 2002

DOCUMENT NUMBER:

11738324-800888328

TITLE:

Product news: Is aspirin resistance associated with

increased cardiovascular risk?

SOURCE:

INPHARMA 20 Jun 2002 ISSN: 1173-8324

DOCUMENT TYPE:

(MIX)

WORD COUNT:

359

=> s l1 AND (quartile OR quantile)

50 FILES SEARCHED...

37 L1 AND (QUARTILE OR QUANTILE)

=> dup rem 16

DUPLICATE IS NOT AVAILABLE IN 'ADISINSIGHT, ADISNEWS, DGENE, DRUGMONOG2, FEDRIP, FOREGE, GENBANK, IMSPRODUCT, IMSRESEARCH, KOSMET, NUTRACEUT, PCTGEN, PHAR, PHARMAML, PROUSDDR, PS, RDISCLOSURE, SYNTHLINE'. ANSWERS FROM THESE FILES WILL BE CONSIDERED UNIQUE PROCESSING COMPLETED FOR L6

=> s 17 not 15

17 FILES SEARCHED...

32 FILES SEARCHED...

56 FILES SEARCHED...

13 L7 NOT L5

=> d 18 1-13 ibib abs

ANSWER 1 OF 13 ADISCTI COPYRIGHT (C) 2006 Adis Data Information BV on STN ACCESSION NUMBER: 2004:4069 ADISCTI

DOCUMENT NUMBER:

800954770

TITLE:

L7

Slopidogrel resistance is associated with increased risk of requirent atherothrombotic events in patients with acute

myocardial infarction.

21 DUP REM L6 (16 DUPLICATES REMOVED)

ADIS TYTLE: Clopidogrel: therapeutic use.

Myocardial infarction

Association between clopidogrel resistance and

cardiovascular risk

In patients undergoing coronary stenting .

Matetzky S; Shenkman B; Guetta V; Shechter M; Bienart R; et AUTHOR:

CORPORATE SOURCE:

SOURCE:

Tel Aviv University, Israel. Circulation (Jun 29, 2004), Vol. 109, No. 25, pp. 3171-3175

DOCUMENT TYPE:

REFERENCE:

Ischaemic Heart Disease | Antithrombotics

FILE SEGMENT:

Summary English

LANGUAGE:

859

WORD COUNT:

ADISCTI COPYRIGHT (C) 2006 Adis Data Information BV on STN

ANSWER 2 OF ACCESSION NUMBER: DOCUMENT NUMBER:

2002:7491 ADISCTI 800920620

TITLE:

Effectiveness of clopidogrel versus aspirin in

preventing acute myocardial infarction in patients with

symptomatic atherothrombosis (CAPRIE Trial). ADIS TITLE: Clopidogrel vs aspirin: therapeutic

use.

Prevention of myocardial infarction

Efficacy according to risk stratification: CAPRIE trial.

AUTHOR:

Cannon C P; CAPRIE Investigators.

CORPORATE SOURCE:

SOURCE:

Brigham and Women's Hospital, Boston, Massachusetts, USA. American Journal of Cardiology (Oct 1, 2002), Vol. 90, pp.

760-762

DOCUMENT TYPE:

Study

REFERENCE:

Ischaemic Heart Disease | Antithrombotics

FILE SEGMENT: LANGUAGE:

Summary English

WORD COUNT:

703

ACCESSION NUMBER:

ANSWER 3 OF 13 ADISCTI COPYRIGHT (C) 2006 Adis Data Information BV on STN

2002:3560 ADISCTI

DOCUMENT NUMBER:

800906570

TITLE:

Aspirin-resistant thromboxane

blosynthesis and the risk of myocardial infarction, stroke,

or cardiovascular death in patients at high risk for

card vascular events.

ADIS TYTLE: Aspirin: therapeutic use.

Cardiova cular disorders

Persistent thromboxane generation as a mechanism

of resistance.

AUTHOR:

Eikelboom J W. Hirsh J; Weitz J I; Johnston M; Yi Q; et al. University of Western Australia, Perth, Western Australia,

Australia.

SOURCE:

Circulation (Apr 9, 2002), Vol. 105, pp. 1650-1655

DOCUMENT TYPE:

CORPORATE SOURCE:

Study

REFERENCE:

Ischaemic Heart Disease Antithrombotics

FILE SEGMENT: LANGUAGE:

Summary English

WORD COUNT:

945

ANSWER 4 OF 13 ADISCTI COPYRIGHT (C) 2006 Adis Data Information BV on STN

ACCESSION NUMBER: DOCUMENT NUMBER:

2002:2686 ADISCTI 800903557

TITLE:

Predicting and preventing myocardial infarction with

clopidogrel in patients with symptomatic atherothrombosis:

results from CAPRIE.

ADIS TITLE: Aspirin vs clopidogrel: therapeutic

Cardiovascular disorders

Identification of risk factors for MI in patients from the

CAPRIE trial.

Cannon C P; CAPRIE Investigators.

CORPORATE SOURCE:

Brigham and Women's Hospital, Boston, Massachusetts, USA. - Journal of the American College of Cardiology (Mar 6, 2002)

SOURCE: , Vol. 39 (Suppl. A), pp. 290

DOCUMENT TYPE:

Study

REFERENCE:

Ischaemic Heart Disease | Antithrombotics

FILE SEGMENT: LANGUAGE:

Summarv English

WORD COUNT:

423

ANSWER 5 OF 13 ADISCTI COPYRIGHT (C) 2006 Adis Data Information BV on STN

ACCESSION NUMBER:

2001:18411 ADISCTI

DOCUMENT NUMBER:

800880624

TITLE:

Effect of clopidogrel added to aspirin before

percutaneous coronary intervention on the risk associated

with C-reactive protein.

ADIS TITLE: Clopidogrel + aspirin: therapeutic

use.

Coronary disorders

Effect of clopidogrel pre-treatment on the risk associated

with elevated C reactive levels In patients undergoing PCI.

AUTHOR:

Chew D P; Bhatt D L; Robbins M A; Mukherjee D; Roffi M; et

al.

CORPORATE SOURCE: Cleveland Clinic Foundation, Cleveland, Ohio, USA.

SOURCE: American Journal of Cardiology (Sep 15, 2001), Vol. 88, pp.

672-674

DOCUMENT TYPE: Study

REFERENCE: Ischaemic Heart Disease | Antithrombotics

FILE SEGMENT: Summary
LANGUAGE: English
WORD COUNT: 687

L8 ANSWER 6 OF 13 CAPLUS COPYRIGHT 2006 ACS on STN

ACCESSION NUMBER: 2006:62755 CAPLUS

TITLE: \ Persistent production of platelet thromboxane

A2 in patients chronically treated with

aspirin

AUTHOR(S):

Pulcinelli, F. M.; Riondino, S.; Celestini, A.;
Pignatelli, P.; Trifiro, E.; Di Renzo, L.; Violi, F.

CORPORATE SOURCE:

Department of Experimental Medicine and Pathology,

University 'La Sapienza', Rome, 00161, Italy

SOURCE: \ Journal of Thrombosis and Haemostasis (2005), 3(12),

2784-2789

CODEN: JTHOA5; ISSN: 1538-7933 Blackwell Publishing, Inc.

PUBLISHER: Blackwe DOCUMENT TYPE: Journal LANGUAGE: English

Background: Patiants treated with aspirin may have a reduced sensitivity to ita antiplatelet effect. The mechanism accounting for such a reduced sensitivhty might involve an impaired interaction of aspirin with cyclooxygenase-1 (COX)-1. Objective: We sought to investigate whether platelets from patients under chronic treatment with aspirin still produce \TxA2 and whether there is any relationship between the eventual persistent TxA2 formation and platelet aggregation. Finally, whether platelet-derived TxA2 can be inhibited by in vitro addition Finally, whether platelet-derived TxA2 can be inhibited by in vitro addit of aspirin. Methods: Collagen-induced platelet aggregation and thromboxane-A2 (TxA2) were measured in 196 patients treated with aspirin (100-330 mg day-1) because of previous vascular events or presence of risk factors of atherosclerosis. Results: Collagen-induced TxA2 production of the entire cohort was 128.7 ± 21.6 pg 10-8 cells, and was significantly correlated with platelet aggregation (Spearman's correlation coefficient = 0.44; R < 0.0001). Patients in the highest quartile of TxA2 showed higher platelet response to collagen (P < 0.0001) when compared with those in the lowest quartile. In a 0.0001) when compared with those in the lowest quartile. In a subgroup of 96 patients, platelets were treated in vitro with a TxA2 receptor antagonist (13-azaprostanoic acid) or aspirin before stimulation with collagen. 13-APA acid significantly inhibited platelet aggregation. Aspirin reduced (-72.9%) Tx^{2} production in patients with TxA2 values above the median but it was ineffective in those with TxA2 values below the median. Conclusion: It some patients chronically treated with aspirin platelet production of TxA2 may persist and account for enhanced platelet aggregation. Incomplete inhibition of COX-1 seems to be implicated in persistent TxA2 production

REFERENCE COUNT: 13 THERE ARE 13 CITED REFERENCES AVAILABLE FOR THIS RECORD. ALL CITATIONS AVAILABLE IN THE RE FORMAT

L8 ANSWER 7 OF 13 IFIPAT COPYRIGHT 2006 IFI on STN AN 10608512 IFIPAT; IFIUDB; IFICDB

TITLE: METHOD FOR PREDICTING CARDIOVASCULAR EVENTS

INVENTOR(S): Eikelboom; John, Canning Vale Wa, AU

Hirsh; Jack, Burlington, CA Yusuf; Salim, Carlisle, CA

PATENT ASSIGNEE(S): Unassigned

AGENT: FISH & RICHARDSON PC, 225 FRANKLIN ST, BOSTON, MA,

02110, US

NUMBER PK DATE

PATENT INFORMATION: US 2004115735 A1 20040617 APPLICATION INFORMATION: US 2003-670122 20030924 20030924

GRANTED PATENT NO.

APPLN. NUMBER DATE OR STATUS _____

CONTINUATION OF: WO 2003-CA422 20030324

> NUMBER DATE ----------

US 2002-367883P PRIORITY APPLN. INFO.: 20020324 (Provisional)

FAMILY INFORMATION: US 2004115735 20040617

DOCUMENT TYPE: Utility

Patent Application - First Publication

FILE SEGMENT: CHEMICAL

APPLICATION

PARENT CASE DATA:

This application is a continuation of application no. PCT/CA03/ 00422 filed on Mar. 24, 2003 which claims priority under 35 USC (sec) 119(e) to U.S. Provisional Application No. 60/367,883 filed Mar. 24, 2002, the entire contents of which are hereby incorporated by reference in their entirety.

NUMBER OF CLAIMS: 17 5 Figure(s).

DESCRIPTION OF FIGURES:

FIG. 1 demonstrates graphically the relationship between 11dehydro ***thromboxane*** B2 levels and risk of a cardiovascular event;

FIG. 2 illustrates one embodiment of a test device according to the present invention:

FIG. 3 illustrates the test device of FIG. 2 in association with a second strip;

FIG. 4 illustrates a preferred embodiment of a test device of the present invention; and

FIG. 5 illustrates yet another embodiment of a test device.

A novel method for assessing the risk of a cardiovascular event is provided. The concentration of 11-dehydro thromboxane in a urine sample is measured and compared to a set of standardized quartile concentrations. A concentration of urinary 11-dehydro thromboxane that falls within the fourth quartile is indicative of a greatly increased risk of a recurrent cardiovascular event.

CLMN 17 5 Figure(s).

FIG. 1 demonstrates graphically the relationship between 11dehydro thromboxane B2 levels and risk of a cardiovascular event;

FIG. 2 illustrates one embodiment of a test device according to the present invention;

FIG. 3 illustrates the test device of FIG. 2 in association with a second strip;

FIG. 4 illustrates a preferred embodiment of a test device of the present invention; and

FIG. 5 illustrates yet another embodiment of a test device.

L8ANSWER 8 OF 13 PASCAL COPYRIGHT 2006 INIST-CNRS. ALL RIGHTS RESERVED. on STN

ACCESSION NUMBER: 2002-0275093 PASCAL

COPYRIGHT NOTICE: Copyright .COPYRGT. 2002 INIST-CNRS. All rights

reserved.

TITLE (IN ENGLISH): Aspirin-resistant thromboxane

biosynthesis and the risk of myocardial infarction, stroke, or cardiovascular death in patients at high

risk for cardiovascular events

AUTHOR: EIKELBOOM John W.; HIRSH Jack; WEITZ Jeffrey I.;

JOHNSTON Marilyn; QILONG YI; YUSUF Salim

CORPORATE SOURCE:

Department of Medicine, University of Western Australia, Thrombosis and Haemophilia Unit, Royal Perth Hospital, Perth, Australia; Hamilton Civic Hospitals Research Centre, Hamilton, Canada;

Department of Medicine, McMaster University, Hamilton, Canada; Hemostasis Reference Laboratory, Hamilton Civic Hospitals, Hamilton, Canada; Biostatistics Department, Princess Margaret Hospital, Toronto, Canada; Population Health Institute, McMaster

University, Hamilton, Canada

SOURCE:

Circulation: (New York, N.Y.), (2002), 105(14),

1650-1655, 29 refs.

ISSN: 0009-7322 CODEN: CIRCAZ

DOCUMENT TYPE:

Journal BIBLIOGRAPHIC LEVEL: Analytic COUNTRY: United States English

LANGUAGE: AVAILABILITY:

INIST-5907, 354000100560270080

AN 2002-0275093 PASCAL

CP Copyright .COPYRGT. 2002 INIST-CNRS. All rights reserved. AΒ Background-We studied whether aspirin resistance, defined as failure of suppression of thromboxane generation, increases the risk of cardiovascular events in a high-risk population. Methods and Results-Baseline urine samples were obtained from 5529 Canadian patients enrolled in the Heart Outcomes Prevention Evaluation (HOPE) Study, Using a nested case-control design, we measured urinary 11-dehydro

thromboxane B.sub.2 levels, a marker of in vivo

thromboxane generation, in 488 cases treated with aspirin who had myocardial infarction, stroke, or cardiovascular death during 5 years of follow-up and in 488 sex- and age-matched control subjects also receiving aspirin who did not have an event. After adjustment for baseline differences, the odds for the composite outcome of myocardial infarction, stroke, or cardiovascular death increased with each increasing quartile of 11-dehydro thromboxane B.sub.2, with patients in the upper quartile having a 1.8-times-higher risk than those in the lower quartile (OR, 1.8; 95% CI, 1.2 to 2.7; P=0.009). Those in the upper quartile

had a 2-times-higher risk of myocardial infarction (OR, 2.0; 95% CI, 1.2 to 3.4; P=0.006) and a 3.5-times-higher risk of cardiovascular death (OR, 3.5; 95% CI, 1.7 to 7.4; P<0.001) than those in the lower

quartile. Conclusions-In aspirin-treated patients, urinary concentrations of 11-dehydro thromboxane B.sub.2 predict the future risk of myocardial infarction or cardiovascular death. These findings raise the possibility that elevated urinary 11-dehydro thromboxane B.sub.2 levels identify patients who are relatively

resistant to aspirin and who may benefit from additional

antiplatelet therapies or treatments that more effectively block in vivo thromboxane production or activity.

ANSWER 9 OF 13 USPATFULL on STN

ACCESSION NUMBER: 2006:10625 USPATFULL

Methods for the treatment of back pain TITLE:

INVENTOR(S): Friedmann, Nadav, Lafayette, CA, UNITED STATES Barbier, Remi, San Francisco, CA, UNITED STATES Schoenhard, Grant L., San Carlos, CA, UNITED STATES

	NUMBER	KIND	DATE	
US	2006009478	A1	20060112	
US	2005-89283	A1	20050323	(11)

APPLICATION INFO.:

PATENT INFORMATION:

RELATED APPLN. INFO.: Continuation-in-part of Ser. No. US 2004-966703, filed

on 15 Oct 2004, PENDING

NUMBER DATE PRIORITY INFORMATION: US 2003-511841P 20031015 (60) US 2004-566189P 20040427 (60)

US 2004-566189P 20040427

DOCUMENT TYPE: Utility

APPLICATION

LEGAL REPRESENTATIVE: MCANDREWS HELD & MALLOY, LTD, 500 WEST MADISON STREET,

SUITE 3400, CHICAGO, IL, 60661, US

NUMBER OF CLAIMS: 110 EXEMPLARY CLAIM: 1

NUMBER OF DRAWINGS: 13 Drawing Page(s)

LINE COUNT: 10857

CAS INDEXING IS AVAILABLE FOR THIS PATENT.

AB Methods and materials, including novel compositions, dosage forms and methods of administration, useful for treating back pain using opioid antagonists, including combinations of opioid antagonists and opioid agonists. Methods and materials comprising opioid antagonists or combinations opioid antagonists and agonists may optionally include one or more additional therapeutic agents.

CAS INDEXING IS AVAILABLE FOR THIS PATENT.

L8 ANSWER 10 OF 13 USPATFULL on STN

ACCESSION NUMBER: 2005:281602 USPATFULL

TITLE: Methods and materials useful for the treatment of

arthritic conditions, inflammation associated with a

chronic condition or chronic pain

INVENTOR(S): Schoenhard, Grant L., San Carlos, CA, UNITED STATES

Friedmann, Nadav, Lafayette, CA, UNITED STATES

PATENT ASSIGNEE(S): Pain Therapeutics, Inc. (U.S. corporation)

DOCUMENT TYPE: Utility
FILE SEGMENT: APPLICATION
MCANDREWS HE

LEGAL REPRESENTATIVE: MCANDREWS HELD & MALLOY, LTD, 500 WEST MADISON STREET,

SUITE 3400, CHICAGO, IL, 60661, US

NUMBER OF CLAIMS: 65 EXEMPLARY CLAIM: 1

NUMBER OF DRAWINGS: 13 Drawing Page(s) LINE COUNT: 6326 .

CAS INDEXING IS AVAILABLE FOR THIS PATENT.

AB Methods and materials, including novel compositions, dosage forms and methods of administration, useful for treating arthritic conditions, inflammation associated with a chronic condition, and/or chronic pain, including pain from arthritis and inflammation, using opioid antagonists, including combinations of opioid antagonists and opioid agonists. Methods and materials comprising opioid antagonists or combinations opioid antagonists and agonists may optionally include one or more additional therapeutic agents.

CAS INDEXING IS AVAILABLE FOR THIS PATENT.

L8 ANSWER 11 OF 13 USPATFULL on STN

ACCESSION NUMBER: 2005:143804 USPATFULL

TITLE: Methods for treating cardiovascular disease using a

soluble CTLA4 molecule

INVENTOR(S): Rusnak, James, Newtown, PA, UNITED STATES

NUMBER KIND DATE

PATENT INFORMATION: US 2005123539 A1 20050609 APPLICATION INFO.: US 2004-910531 A1 20040803 (10)

NUMBER DATE

PRIORITY INFORMATION: US 2003-492430P 20030804 (60)

DOCUMENT TYPE: Utility FILE SEGMENT: APPLICATION

LEGAL REPRESENTATIVE: STEPHEN B. DAVIS, BRISTOL-MYERS SQUIBB COMPANY, PATENT

DEPARTMENT, P O BOX 4000, PRINCETON, NJ, 08543-4000, US

NUMBER OF CLAIMS:

EXEMPLARY CLAIM:

NUMBER OF DRAWINGS: 103 Drawing Page(s)

LINE COUNT: 6609

CAS INDEXING IS AVAILABLE FOR THIS PATENT.

The present invention relates to compositions and methods for treating cardiovascular system diseases by administering to a subject soluble CTLA4 molecules that block endogenous B7 molecules from binding their

ligands.

CAS INDEXING IS AVAILABLE FOR THIS PATENT.

ANSWER 12 OF 13 USPATFULL on STN

ACCESSION NUMBER: 2005:131850 USPATFULL

TITLE: Cicletanine in combination with oral antidiabetic

and/or blood lipid-lowering agents as a combination

therapy for diabetes and metabolic syndrome

INVENTOR(S): Fong, Benson M., San Francisco, CA, UNITED STATES

Cornett, Glenn V., Palo Alto, CA, UNITED STATES

DATE NUMBER KIND -----US 2005113314 A1 20050526 US 2004-929108 A1 20040827 (10) PATENT INFORMATION:

APPLICATION INFO.:

NUMBER DATE ______

PRIORITY INFORMATION: US 2003-498916P 20030829 (60)

DOCUMENT TYPE: Utility FILE SEGMENT: APPLICATION

LEGAL REPRESENTATIVE: KNOBBE MARTENS OLSON & BEAR LLP, 2040 MAIN STREET,

FOURTEENTH FLOOR, IRVINE, CA, 92614, US

NUMBER OF CLAIMS: 42 EXEMPLARY CLAIM: 1

LINE COUNT: 2354

CAS INDEXING IS AVAILABLE FOR THIS PATENT.

Preferred embodiments of the present invention are related to novel therapeutic drug combinations and methods for treating and/or preventing complications in patients with diabetes and/or metabolic syndrome. More particularly, aspects of the present invention are related to using a combination of cicletanine and an oral antidiabetic agent for treating and/or preventing complications (including microalbuminuria,

nephropathies, retinopathies and other complications) in patients with

diabetes or metabolic syndrome.

CAS INDEXING IS AVAILABLE FOR THIS PATENT.

ANSWER 13 OF 13 USPATFULL on STN

ACCESSION NUMBER: 2004:165339 USPATFULL

Device for measuring an analyte TITLE: INVENTOR(S): Yusuf, Salim, Carlisle, CANADA

Hirsh, Jack, Burlington, CANADA Eikelboom, John, Canning Vale WA, AUSTRALIA

KIND DATE NUMBER US 2004126826 A1 20040701 US 2003-670118 A1 20030924 PATENT INFORMATION: APPLICATION INFO.: (10)RELATED APPLN. INFO.: Continuation-in-part of Ser. No. WO 2003-CA422, filed on 24 Mar 2003, UNKNOWN NUMBER DATE _____ US 2002-367883P 20020324 (60) PRIORITY INFORMATION: DOCUMENT TYPE: Utility FILE SEGMENT: APPLICATION LEGAL REPRESENTATIVE: FISH & RICHARDSON PC, 225 FRANKLIN ST, BOSTON, MA, 02110 NUMBER OF CLAIMS: 11 EXEMPLARY CLAIM: 1 NUMBER OF DRAWINGS: 4 Drawing Page(s) LINE COUNT: 926 CAS INDEXING IS AVAILABLE FOR THIS PATENT. A novel method for detecting the concentration of a metabolite in a fluid sample is provided. Devices for the detection of the analyte are also provided. In particular, a device for determining the concentration of 11-dehydro thromboxane in a urine sample and comparing it to a set of standardized quartile concentrations is provided. A concentration of urinary 11-dehydro thromboxane that falls within the fourth quartile is indicative of a greatly increased risk of a recurrent cardiovascular event. CAS INDEXING IS AVAILABLE FOR THIS PATENT. => d his (FILE 'HOME' ENTERED AT 12:59:56 ON 03 FEB 2006) FILE 'ADISCTI, ADISINSIGHT, ADISNEWS, AGRICOLA, ANABSTR, ANTE, AQUALINE, AQUASCI, BIOENG, BIOSIS, BIOTECHDS, BIOTECHNO, CABA, CAPLUS, CEABA-VTB, CIN, CONFSCI, CROPB, CROPU, DDFB, DGENE, DISSABS, DRUGB, DRUGMONOG2, DRUGU, EMBAL, EMBASE, ESBIOBASE, FEDRIP, ... 'ENTERED AT 13:00:05 ON 03 FEB 2006 L1 18243 S THROMBOXANE AND ASPIRIN FILE 'REGISTRY' ENTERED AT 13:03:05 ON 03 FEB 2006 L2 1 S 50-78-2 FILE 'ADISCTI, ADISINSIGHT, ADISNEWS, AGRICOLA, ANABSTR, ANTE, AQUALINE, AQUASCI, BIOENG, BIOSIS, BIOTECHDS, BIOTECHNO, CABA, CAPLUS, CEABA-VTB, CIN, CONFSCI, CROPB, CROPU, DDFB, DGENE, DISSABS, DRUGB, DRUGMONOG2, DRUGU, EMBAL, EMBASE, ESBIOBASE, FEDRIP, ...' ENTERED AT 13:03:38 ON 03 FEB 2006 L3 9682 S L2 AND THROMBOXANE L418 S L3 AND (QUARTILE OR QUANTILE) L5 11 DUP REM L4 (7 DUPLICATES REMOVED) L6 37 S L1 AND (QUARTILE OR QUANTILE) L7 21 DUP REM L6 (16 DUPLICATES REMOVED) L8 13 S L7 NOT L5 => logoff y COST IN U.S. DOLLARS SINCE FILE TOTAL ENTRY SESSION FULL ESTIMATED COST 171.74 277.79 DISCOUNT AMOUNTS (FOR QUALIFYING ACCOUNTS) SINCE FILE TOTAL SESSION ENTRY

-1.50

-1.50

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STN INTERNATIONAL LOGOFF AT 13:22:49 ON 03 FEB 2006